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APPLICANTS

Michael A. Inchalik, Pittsford, NY;
 James A. Barnard, Scottsville, NY; *OK PC*

** CONTINUING DATA ***** *me PC*

** FOREIGN APPLICATIONS ***** *me PC*

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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>Pat. Clerk</i> <i>PC</i> Examiner's Signature Initials	STATE OR COUNTRY NY	SHEETS DRAWING 19	TOTAL CLAIMS 7	INDEPENDENT CLAIMS 2
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ADDRESS
 Thomas H. Close
 Patent Legal Staff
 Eastman Kodak Company
 343 State Street
 Rochester, NY
 14650-2201

TITLE
 Credit or debit copy-protected optical disc

FILING FEE RECEIVED 710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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